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DATE: March 12, 2004

To:

NAME	FAX No.	PHONE No.
US Patent and Trademark Office	(703) 872-9306	

FROM: Einar Stole

PHONE: (202) 835-7553

Re: US Patent Application Serial No. 10/724,833

FILE NUMBER: 17357.01302US			
NUMBER OF PAGES, INCLUDING COVER:	8	ORIGINALS FOLLOW BY MAIL:	NO

MESSAGE:

Please see attached.

Regards,
Einar Stole

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PAGE 1/8 * RCVD AT 3/12/2004 11:18:37 AM [Eastern Standard Time] * SVR:USPTO-EFXXRF-1/0 * DNIS:8729306 * CSID:2028357586 * DURATION (mm-ss):03-10

PTO/SB/Z1 (08-03)

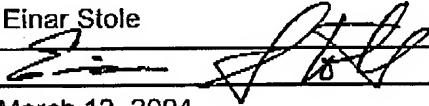
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/724,833
	Filing Date	November 2, 20003
	First Named Inventor	Nelson
	Art Unit	N/A
	Examiner Name	N/A
Total Number of Pages in This Submission	Attorney Docket Number	17357.01302US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Power of Attorney and Correspondence Address Indication Form 2. Statement Under 37 CFR 1.73(b) 3. Assignments with Recordation Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Einar Stole
Signature	
Date	March 12, 2004

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**POWER OF ATTORNEY
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INDICATION FORM**

Application Number	107724,833
Filing Date	November 2, 2003
First Named Inventor	Nelson
Title	Artificial Low-Density ...
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	17357.01302US

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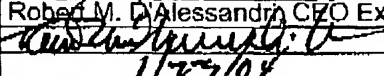
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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Robert M. D'Alessandro, CFO Executive Director		
Signature			
Date	1/23/04	Telephone	(304) 293-4511

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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